

PTO/SB/81 (06-03)

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/647,192
Filing Date	August 25, 2003
First Named Inventor	D. Dygert
Title	WIDE MOUTH PET CONTAINER, etc.
Art Unit	1732
Examiner Name	
Attorney Docket Number	C-29

I hereby appoint:

☐ Practitioners at Customer Number:

OR

☒ Practitioner(s) named below:

Name	Registration Number
David A. Tamburro	24,744

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number:

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OR

<input checked="" type="checkbox"/> Firm or Individual Name	David A. Tamburro				
Address	1129 West Lakes Drive				
Address					
City	Deerfield Beach	State	FL	Zip	33442
Country	US				
Telephone	954-419-9307	Fax	954-419-9454		

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

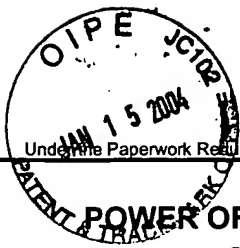
Name	Douglas M. Dygert		
Signature	<i>Douglas M. Dygert</i>		
Date	1/5/04	Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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Firm or
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Address

City

Deerfield Beach

State

FL

Zip

33442

Country

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Telephone

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Assignee of record of the entire interest. See 37 CFR 3.71.
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SIGNATURE of Applicant or Assignee of Record

Name David A. Brunson

Signature

David A. Brunson

Date

12-15-03

Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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